

QUARTERLY REPORT OF CONDITION
FOR SAVINGS BANKS AND NON-DEPOSIT TRUST COMPANIES
AS OF _____

Report must be submitted to the Office of the State Bank Commissioner at 555 E. Loockerman Street, Suite 210, Dover, DE 19901, within 30 days after the end of the reporting period. Dollar amounts should be reported in thousands.

NAME OF INSTITUTION: _____

ASSETS

	Dollar Amounts In Thousands	
1. Cash and balances due from depository institutions		1.
2. Securities		2.
3. Federal funds sold and securities purchased under agreements to sell		3.
4. Loans and lease financing receivables (net of unearned income, allowances, and reserves)		4.
5. Trading assets		5.
6. Premises and fixed assets (including capitalized leases)		6.
7. Other real estate owned		7.
8. Investments in unconsolidated subsidiaries and associated companies		8.
9. Customers' liability to this bank on acceptances outstanding		9.
10. Intangible assets		10.
11. Other assets		11.
12. TOTAL ASSETS (Sum of Items 1 through 11)		12.

LIABILITIES

13. Deposits		13.
14. Federal funds purchased and securities sold under agreements to repurchase		14.
15. Trading liabilities		15.
16. Other borrowed money (includes mortgage indebtedness and obligations under capitalized leases)		16.
17. <i>(Not applicable)</i>		17.
18. Bank's liability on acceptances executed and outstanding		18.
19. Subordinated notes and debentures		19.
20. Other liabilities		20.
21. TOTAL LIABILITIES (Sum of Items 13 through 20)		21.
22. Minority interest in consolidated subsidiaries		22.

Name of Institution: _____

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EQUITY CAPITAL

	Dollar Amounts In Thousands	
23. Perpetual preferred stock and related surplus		23.
24. Common stock		24.
25. Surplus (exclude all surplus related to preferred stock)		25.
26. a. Retained earnings		26.a
b. Accumulated other comprehensive income [includes net unrealized holding gains (losses) on available-for-sale securities, accumulated net gains (losses) on cash flow hedges, cumulative foreign currency translation adjustments, and minimum pension liability adjustments]		26.b
27. Other equity capital components (includes treasury stock and unearned Employee Stock Ownership Plan shares)		27.
28. TOTAL EQUITY CAPITAL (Sum of Items 23 through 27)		28.
29. TOTAL LIABILITIES, MINORITY INTEREST, AND EQUITY CAPITAL (Sum of Items 21, 22, and 28)		29.

OFF BALANCE SHEET ITEMS

List types and amounts (i.e., commitments, letters of credit, futures contracts, etc.)

I, _____ , _____
(name) (title)

of the above-named institution, do hereby declare that this Report of Condition is true and correct to the best of my knowledge and belief.

Date

Signature

Phone Number

We, the undersigned directors, attest to the correctness of this statement of assets and liabilities. We declare that it has been examined by us and, to the best of our knowledge and belief, is true and correct.

Director

Director